

City of San Jose
Permit Application

Inspection Phone No. 277-4541

PERMIT # **EM02-11129**
Inspection Area: 20AIssuance Date: **6/14/02** **OPI**

Project Address: 298 CLEARPARK CL

PROPERTY OWNER

OWNER'S NAME: GREEN ARLA A JR AND SANDRA E
MAILING ADDRESS: 298 CLEARPARK CL
CITY/STATE/ZIP: SAN JOSE CA 95136
PHONE #: 408-281-3140
E-MAIL ADDRESS:
APN: 46230018

Bldg#

Suite/Apt#

CONTRACTOR

NAME: A PERFECT CLIMATE
MAILING ADDRESS: 10570 S. DeAnza Boulevard
CITY/STATE/ZIP: Cupertino Ca 95014
PHONE #: 408-861-9545
E-MAIL ADDRESS: permits@aperfectclimate.com
Business Lic #: 108723

Note: If the property is located in a development where a home owner association has enforceable CCR's, their approval may be required.

☐ Permit is associated with a damage survey☐ Permit is associated with a

Work Order

☐ Permit is requested by Code Enforcement☐ Historic

Building Type: Single Family

Building

Electrical

☒ AC

Mechanical

☒ Furnace with AC

Plumbing

	Date	Insp#	Coding	Print Name
Inspection Status	/ /			
	/ /			
	/ /			
	/ /			

	Date	Insp#	Coding	Print Name
FINAL	/ /			
	/ /			
	/ /			
	/ /			

Licensed Contractors Declaration: I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Class: C20 License Number: 723158

Date: **6/11/02**Contractor's Signature: *Catalina Lopez*

Workers' Compensation Declaration: I hereby affirm under penalty of perjury one of the following declarations:

☐ I have and will maintain a certificate of consent to self-insure for workers' compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.☒ I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

CARRIER:

POLICY NO.:

(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

☐ I certify that, in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.Date: **6/11/02**Applicant Signature: *Catalina Lopez*

WARNING: Failure to secure workers' compensation coverage is unlawful, and shall subject an employer to criminal penalties and civil fines up to one hundred thousand dollars (\$100,000), in addition to the cost of compensation, damages as provided for in Section 3706 of the Labor Code, interest, and attorney fees.

Construction Lending Agency Declaration: I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name:

Lender's Address:

I Certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representatives of this county to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant: *[Signature]*Date: **6/12/02**

Printed Name of Applicant:

A PERFECT CLIMATE

OK n6
6/17